Case 1:08-cv-00198

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Page 1 of 17

AUGUST 1, 2008

MICHAEL W. DOBBINS

MICHAEL W.

NORTHERN DISTRICT OF ILLINOIS CLERK, U.S. DISTRICT COURT EASTERN DIVISION

Judge Manning

Magistrate Judge Nodan

(Enter above the full name of the plaintiff or plaintiffs in this action)

Case No: 080 0198

(To be supplied by the Clerk of this Court)

Polle Ufficer Bridge 6054 Chicago, Police Department 3340 W. Fillmore, Liability of Supervisory Officers, Other Officers the scene, Individual Officer with immediate contact plaintiff, On 9-28-07, Police Officer Dobek tro n 5555 W. Grando Contral Police Department for denied me Medica 1 tention for Medical Treatment in their individual capacities (Enter above the full name of ALL for denting me Medical Treatment and defendants in this action. Do not Lieuteanter Captain whom check the surveillance use "et al.") CHECK ONE ONLY: camera on 9-25-07 also DM 5 intake and DM 11 Cook

SECOND AMENDED

COMPLAINT UNDER THE CIVIL RIGHTS ACT, TITLE 42 SECTION 1983 (Ounty) U.S. Code (state, county, or municipal defendants)

COMPLAINT UNDER THE CONSTITUTION ("BIVENS" ACTION), TITLE 28 SECTION 1331 U.S. Code (federal defendants)

OTHER (cite statute, if known)

BEFORE FILLING OUT THIS COMPLAINT, PLEASE REFER TO "INSTRUCTIONS FOR FILING." FOLLOW THESE INSTRUCTIONS CAREFULLY.

I.	Plair	ntiff(s):
	A.	Name: Danayne Tolliver
	B.	List all aliases:
	C.	Prisoner identification number: 20070072569
	D.	Place of present confinement: Look County jail
	E.	Address: PIDIBOX 089002, Chicago, 7/1,60608
	numb	ere is more than one plaintiff, then each plaintiff must list his or her name, aliases, I.D. per, place of confinement, and current address according to the above format on a ate sheet of paper.)
II.	(In A positi	ndant(s): below, place the full name of the first defendant in the first blank, his or her official on in the second blank, and his or her place of employment in the third blank. Space to additional defendants is provided in B and C.)
	A.	Defendant: Derry Pentmune
		Title: Police Officer 6034
		Place of Employment: 3340 W. Allmore
	В.	Defendant:
		Title: Polle Officer
		Place of Employment: 5555 W, Grand + Central Police Station Defendant: Other. Officers present at the Segme To be Subproven
	C.	Defendant: Other. Officers present at the Seane 18 be su sproon
· ·		Title: Pollce Ufficer John Due
		Place of Employment: Chicago Police Department
	accord	u have more than three defendants, then all additional defendants must be listed ling to the above format on a separate sheet of paper.)
	\mathcal{I}	individual Officer with immediate contact with the plat
		Individual Officer John Does To be Subposen 9
		Chicago, Poler Department Rovised 9/2007
toab:	lity.	of Supervisory Ufficers of Supervisors John Dues subpoent police Officials officers John Dues subpoent hicago Police Department
	C	hicago Police Department

Ш.	List ALL lawsuits you (and your co-plaintiffs, if any) have filed in any state or federal
	court in the United States:

A.	Name of case and docket number: Davage Tollwer Va Cook County Administrator Davage Tollwer Va Cook County is 0 5 6613
В.	Approximate date of filing lawsuit: $\frac{1-5-06}{9-23-93}$, $\frac{10-3-06}{9-23-93}$, $\frac{11-29}{9-23-93}$, $\frac{10-3-06}{9-23-93}$
C.	1-23-93 /-9-08 /-9-08 /-9-08 List all plaintiffs (if you had co-plaintiffs), including any aliases: 14 14 14 16 16 16 16 16 16 16 16 16 16 16 16 16
	1) A WAR 7 O/ (IV W
D.	List all defendants: (OOK County) All COK County Administrate,
	hospital Molla Jeh Kins Jame Miry Superinten Sent Snooks Jehry Pentmone Chicago, Police Dapartment
E.	Court in which the lawsuit was filed (if federal court, name the district; if state court, name the county): furthern District of Tilnius Lastern District
F.	Name of judge to whom case was assigned: Judge Ge Heman
G.	Basic claim made: No Medical Treatment
	- AVING CONALTHON
Н.	Disposition of this case (for example: Was the case dismissed? Was it appealed? Is it still pending?):
I.	Approximate date of disposition: I haven't had one vet

IF YOU HAVE FILED MORE THAN ONE LAWSUIT, THEN YOU MUST DESCRIBE THE ADDITIONAL LAWSUITS ON ANOTHER PIECE OF PAPER, USING THIS SAME FORMAT. REGARDLESS OF HOW MANY CASES YOU HAVE PREVIOUSLY FILED, YOU WILL NOT BE EXCUSED FROM FILLING OUT THIS SECTION COMPLETELY, AND FAILURE TO DO SO MAY RESULT IN DISMISSAL OF YOUR CASE. CO-PLAINTIFFS MUST ALSO LIST ALL CASES THEY HAVE FILED.

. Names of Cassel 98-Evinod 981 o Edecution 1.7 in Filed 08/01/2008, Page 4 pt 17 Vs (durking o Police officer Jen KMs Approximate date at #/mg hoursout Sept. between Och 1993/1-5-06/10-2107 9-27-93 1-9-08, 1-9-08, 1-9-0 12-3-07 hist all plaintits Lit you had CO-Hamtits I'm cluding and alies No List all detendants; Gok County Sheritt, Cook County Admiralstrators
Chicago Police Officeren Kms, Gity of Chicago, James Novy, J. Pentimon
Prodent Hospital, John Struger Hospital, Superintendent Snucks
etal, Cook County Medical Staff, Edwin A. Burnette, Richard
505 Richard A Devine, Mark Donglas, Assistants John Does Police Officers John Does Court in which the Lawsult was tiled. It tederal court, name the district, it state court name the country? Northern District of Illnows Eastern District Name of dudge to whom case was -assigned i Judge Agpens John W. Dirrah, Gettleman Basic - Clarm Made & Police Brutality of Musconduct: No Medical Theatment 1) is position at this case for examples was the case-dismissali was it appeal? Is it still pending yes it still pendong Approximate date of disposition? No, It haven't hoppen yet still warten

IV. Statement of Claim:

State here as briefly as possible the facts of your case. Describe how each defendant is involved, including names, dates, and places. Do not give any legal arguments or cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. (Use as much space as you need. Attach extra sheets if necessary.) I was denied Medical Treatment from Grand Central alice station Officers, Other Ottocer though · Dresent acquies line them. having prior complaints Fillmore, Special operation, Supervisor has amounted to rough, reck! deliberate indifference to my constitu Hese Subordi me when I was stopped with on the spot, searched, then matched the discription - inpartia Then with this the Officer the privacy of my body 50 offensive and undecent, in search The said officer tugged on the naist band of my pants to have clear view of my senitals and then my near area using a piece of trash this being a stick of some sort from the ground to distany ass cheek in regionarich of herione, in public.

Making talse allegations and turthermore signing and Filing a Complaint, talsely against me Allegation of, watching me commit a crime, but at the same time search of their suspect. Why stop another person it abserved me committing a crime a Upon discovery of my red shirt A partial discription to their suspect. I was then made this officer's mante suspect This officer do Pentimone gave my property this being the article of clothen I was absrobed of to match or made to match in partial a person being sought for drug sells. A Black hoodie and cell phone and they not only troved to deprived me of my property, but my currenty as well, freedom too and to give him a gun he hould det me go tree, and HAS 15 a Violation of my Constitutiona Civil Rights under the United States of American, Andon my arrived to 5555 W. Grand Chicago Police Station I was denied Medical Treatment from the Liability of Supervisory Officer, Other Officer present at the scene, Individual afficer with immediate contact with the plantith On 9-23-07 when I Dawayne Tollover" was densed Medical Attention, and I was ignore for Medial treatment Although the Supervisors werent present at the scene they are Dable for acquires cing their undantal power by tailure search Jor drugs ignore Police S day selling for assitance anyone assistme, and than came survelllance camera Dive 5,924-07 900m me. 70 p some anevan

subject because I still wasn't getting any assistance's for my Medical problem my butt being sort and in pain so I got some more grievances and Kept On writting them up. And Fingly I was seem but it took months from 9-24-07 To 1-15-08 To be seemby an Doctor in Divill and he gave me some things forme to take to have bone movement, But I couldn't receive any from grand deentral Police Department Officere 9-23-07 John Does by the Police Officers that was at the scene is Liable they never try to prevent it from happening or to assist me with medical attention for treatment I couldn't get for some reason from grando Central Police Department Police Officer on duty hearing me crying out for Jerry Pentimone violated my privacy of my body an act that was so offensive and undecent; in server of drugs, the officer tugged on the watst band of my pants to have clear view of my genitals and then my rear area - using a piece of trash, This being a stick of some got from the ground to do in my ags cheek in search of herron in public without any Medical Treatment. For my butt being VI. Relief:

Revised: 7/20/05

Mess up and still I have to dive that mame	<u>int</u>
over, over again in my sleep which awakes m	e
every night, because the pain I feel in my	ź
buttibecause I couldn't get the Medical	
Treatment while I was in custody of the	2
Police Departement for Medical Treatmen	-
For Medical Attention stace this in order	Ā
happen to me, this will affensive to any	
happen to me, this will affensive to any human being-deprivation for Medical Treatment formy my my from grand	
Treatment formy insun from grand	7
Central Police Department John Doels	
and Offier Dobek, J. Pentimene 6054 and	 +
other John Dee's Police Officer's	
	_
	

V. Relief:

Mental august and in flicting Court and Mental august and in flicting Court and Many and purshment on me Suffering VI. The plaintiff demands that the case be tried by a jury. YES NO CERTIFICATION By signing this Complaint, I certify that the facts stated in this Complaint are true to the best of my knowledge, information and		State briefly exactly no cases or statutes,	what you want the court to do for you. Make no legal arguments. Cite
CERTIFICATION By signing this Complaint, I certify that the facts stated in this Complaint are true to the best of my knowledge, information and belief. I understand that if this certification is not correct, I may be subject to sanctions by the Court. Signed this	To	be comper rental angli	isote for physical pain and
CERTIFICATION By signing this Complaint, I certify that the facts stated in this Complaint are true to the best of my knowledge, information and belief. I understand that if this certification is not correct, I may be subject to sanctions by the Court. Signed this		auliu	
CERTIFICATION By signing this Complaint, I certify that the facts stated in this Complaint are true to the best of my knowledge, information and belief. I understand that if this certification is not correct, I may be subject to sanctions by the Court. Signed this		<u> </u>	len Molloun Dollarg
By signing this Complaint, I certify that the facts stated in this Complaint are true to the best of my knowledge, information and belief. I understand that if this certification is not correct, I may be subject to sanctions by the Court. Signed this	VI.	The plaintiff deman	ds that the case be tried by a jury. X YES NO
Complaint are true to the best of my knowledge, information and belief. I understand that if this certification is not correct, I may be subject to sanctions by the Court. Signed this			CERTIFICATION
Signature of plaintiff or plaintiffs) Dawayne To//ver (Print name) 20070072569 (I.D. Number) P.O. Box 089002 Chicago III, 60608			
(Signature of plaintiff or plaintiffs) Dawayne Tollver (Print name) 20070072569 (I.D. Number) Pioi Box 089002 Chicago Ill, 60608			Signed this, 20
(Print name) 20070072569 (I.D. Number) Pro, Box 089002 Chicago, III, 60608			
20070072569 (I.D. Number) P.O. BOX 089002 Chicago, Ill, 60608			
P.O. BOX 08900Z Chicago, Ill, 60608			20070072569
Chicago, Ill, 60608			(I.D. Number)
			P.O. BOX 089002

Pawayne Tolliver 20070072569
P.O. Box 089002
Div. 11 DG
Chicago, Ill. 60608

Musistrate Judge Mohan Judge Manning Case No# 08 C 0798

I Dawayne Tolliver in respect to the court, I'm senting grievances torms, from the (ook (ounty)9)) showing since that incident happen for me to receive Medical Treatment 9-24-07 when I arrived at the Cook County jail do to the encounter with Police Officer. On 9-23-07 no medical attention or Treatment I reckive and now, it took the look lumby join! H Months to reckive any kind of concern by me writting up an grievance to receive any assistance about my butt being hard real hard bowEL movement is none that's one of the problems I'm having concerning this issue or the pain I have been having and crying because of what the Officer did to me now they give me some Kind of pills to have bouted movement, but nothing for the pain, Also I was i

Document 17 Filed 08/01/2008 Page 12 of 17

Part-A / Control #: ZXX ZX

Referred To: Connect

Processed as a request.

COOK COUNTY DEPARTMENT OF CORRECTIONS **DETAINEE GRIEVANCE**

Detainee Last Name: Tollivey	First Name: Dawayne
ID#: 2007 - 0072569 Div.: 11 Livin	ng Unit: <u>DG</u> Date: <u>1 / 24/ 08</u>
BRIEF SUMMARY OF THE COMPLAINT: Thave	At receive and melical
Treatment for my butt bei	ne hurt do to my
encounter with the Chica	to Police Other the
day of my arrest 9-23-07 who	en I stort complainting
County jail and it took al	
concerning the abuse I took to	is, and non grievances
concerning the abuse I took &	om the Jolice Office on
and my assis sore do to the po	
the undecency expectation	
By Police Officer, E'still Low	King for Medical Treatment
NAME OF STAFF OR DETAINED(S) HAVING INFORMATION REGAL	CDING 44112 COMPLAINT:
I have inform the Medical ST ACTION THAT YOU ARE REQUESTING:	
Torreceive medical Treatme	'rat
DETAINEE SIGNATURE: Dawn	ano Tollive
C.R.W.'S SIGNATURE:	DATE C.R.W. RECEIVED: 125 108
Please note: Decisions of the "Detainee Disciplinary Hearing Board" cannot be g All appeals must be made in writing and directly su	

Case 1:08-cv-00198 Document 17 Filed 08/01/2008 Page 13 of 17

Part-A / Control #: X

Referred To: Sewfeen

Processed as a request.

COOK COUNTY DEPARTMENT OF CORRECTIONS DETAINEE GRIEVANCE

Detainee Last Name: Tolliver First Name: Dawayne
ID#: 2007-0072569Div.: 11 Living Unit: C, C, Date: 2 /13/08
BRIEF SUMMARY OF THE COMPLAINT: I received my appeal and
BRIEF SUMMARY OF THE COMPLAINT: I YE CEIVED MY A PREAL CIND
it is a die I Dawayne Tolliver never retuse
any Medical examine it was Ductor Yn Being
Univertessional toward nie, They are trying to
make it has he I retuse and I never did
That's a lie, I never don any thing return
Medical Treatment Ahat I why I wrote a
ariennie on that issue on Buctur yu
Angrotessional Medical Treatment and I never
nearly anothin on fast grievance I wrote on
Datoand Spenil Worker Martines has it and
I sty Worder, on a reply
NAME OF STAFF OR DETAINEE(S) HAVING INFORMATION REGARDING THIS COMPLAINT:
22 will by in 1810 Bay PRINTER ATT JUNE STORE STORES
I have their ston Lynn on hie I hat was the treating
y in gent of higher spatenten let assist play the make any
DETAINEE SIGNATURE: X Consumal to More
the town that white appeal of your
C.R.W.'S SIGNATURE: DATE C.R.W. RECEIVED: D. 1 / 5 / 8
Please note: Decisions of the "Detainee Disciplinary Hearing Board" cannot be grieved or appealed through the use of a grievance form.

All appeals must be made in writing and directly submitted to the Superintendent.

C.C.D.O.C. DETAINEE GRIEVANCE FORM PROCESSED AS A REQUEST

Please Note :

- If the detainee is not satisfied with the response and/or attempt at resolving this issue, the detainee may resubmit the concern and it will be processed at a grievance.
 - When processed as a request, an appeal of the response and/or action taken cannot be made.
 - When processed as a request, PART-B is not applicable.

Detainee's Last	Name: <u>To / /, ,</u> ID#: <u>2007 - 100</u>	and the state of	it Name: <u>VA ~</u>	1 1
N .				/
Date of Reques	t: <u>2 113 108</u>	Date C.R.W. Re	ceived Request: <u>2</u>	115 108
This request h	as been processed by:	Sucion	-Co-	C.R.W.
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	Part-A / Control #:	X	
:	Referred To:		•
	Processed as a request.		

COOK COUNTY DEPARTMENT OF CORRECTIONS **DETAINEE GRIEVANCE**

Detainee Last Name: Jolliver First Name: Dawayne
ID#: 2007-0072569 Div.: 11 Living Unit: DG Date: 1/15/08
BRIEF SUMMARY OF THE COMPLAINT: The 15 Sue is Collegening the Doctor
CARLOS ALTOZ 1-15-08 Tuesday Morning I was
on sick-call hine, and I complain about my acc
with Police Officer sticking something in my butt. And
I wouldn't det Doctor Carlos Alter unt his finance
triside of my bytt, and he wouldn't wit it
not doing his job as a Doctor and gutting down
what happy to my ass ur my but an 9-23-07
when I conglaint about it since that Hard Just Madica
NAME OF STAFF OR DETAINEE(S) HAVING INFORMATION REGARDING THIS COMPLAINT:
The todoral Court Ibn Knows about it Also
being poke with something Sinside my bythe for Treatment
Della Detainee Signature: Jawaine Selling
R.W.'S SIGNATURE: DATE C.R.W. RECEIVED:/
lease note: Decisions of the "Detainee Disciplinary Hearing Board" cannot be grieved or appealed through the use of a grievance form.

	Part - B / Control #: 2018 X 0095
CCD OC DETAIL	
*EMERGENCY GRIEVANCES ARE THOSE INVOLVING AN IMMEDIATE TH	REFERRAL & RESPONSE
Detainee's Last Name: First Name:	Davarn € ID# 2007-0072569
	173
C.R.W.'S Summary Of The Complaint: Ortaine	Teres unextessinal
- Conduct by M.D. regarding d	Lementaben
C.R.W. Referred Griev. To:	Date Referred: 1/17/08
Response Statement:	
References to Moderal Sec	4,60
	Date: 1808 Div./Dept.
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(print - name of Supt. / Designee / Dept. Admin.) (signature of Supt. / Designee / Dept. Ad	Date Div./Dept.
- Mulling - Mull	Date: ///? /0)
(print - name of Prog. Serv. Admin./ Asst. Admin.) (signature of Prog. Serv. Admin./ Asst. A	dmin
the state of the s	(1)
Date Detainee Received Response:	ignature: Dawayne Tolling
REQUEST FOR AN AP	PEAL
APPEALS MUST BE MADE WITHIN 14 DAYS OF THE DATE THE	PEAL DETAINEE RECEIVED THE RESPONSE
APPEALS MUST BE MADE WITHIN 14 DAYS OF THE DATE THE	PEAL DETAINEE RECEIVED THE RESPONSE
APPEALS MUST BE MADE WITHIN 14 DAYS OF THE DATE THE	PEAL DETAINEE RECEIVED THE RESPONSE
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*EMERGENCY GRIEVANCES ARE THOSE INVOLVING AN IMMEDIA		•
Detainee's Last Name: To // First Name	ne: DANDAY ID#	2001 0072569
Is This Grievance An Emergency? YES	NO 🗀	
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making attention		
	Date Referred:	3 1/3 108
Response Statement:		
Borod to Medical	Server	
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(print - name of Prog. Serv. Admin.) (signature of Prog. Serv. Admin.)	Date:	1/1/2
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Date Detainee Received Response: 3 / 8 / 0 Deta	inee Signature: 📐 🗼 🖊	
REQUEST FOR A	NAPPEAL	
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